

INSTRUCTIONS FOR FORM OP-1

APPLICATION FOR MOTOR PROPERTY CARRIER AND BROKER AUTHORITY

These instructions will assist you in preparing accurate and complete application filings. Applications that do not contain the required information will be rejected and may result in a loss of the application fee. The application must be typed or printed in ink. If additional space is needed to provide a response to any item, use a separate sheet of paper. Identify applicant on each supplemental page and refer to the section and item number in the application for each response.

SECTION I

FMCSA AUTHORITY. If you now have any former Interstate Commerce Commission (ICC), Federal Highway Administration (FHWA), Office of Motor Carrier Safety (OMCS), or Federal Motor Carrier Safety Administration authority or have an application for authority being processed now by FMCSA, check the "YES" box and indicate the MC number you have been assigned. Example: MC-987654.

APPLICANT'S LEGAL BUSINESS NAME and DOING BUSINESS AS NAME. The applicant name should be your full legal business name--the name on the incorporation certificate, partnership agreement, tax records, etc. If you use a trade name that differs from your official business name, indicate this under "Doing Business As Name." Example: If you are John Jones, doing business as Quick Way Trucking, enter "John Jones" under APPLICANT'S LEGAL BUSINESS NAME and "Quick Way Trucking" under DOING BUSINESS AS NAME.

Because the FMCSA uses computers to retain information about licensed carriers, it is important to spell, space, and punctuate any name the same way each time you write it. Example: John Jones Trucking Co., Inc.; J. Jones Trucking Co., Inc.; and John Jones Trucking are considered three separate companies.

BUSINESS ADDRESS/MAILING ADDRESS. The business address is the principal place of business (physical location). Example: 756 Bounty Street; 15433 State Highway 23. If applicant receives mail at an address different from the business location, also provide the mailing address. Example: P.O. Box 3721. NOTE: To receive pertinent FMCSA notices and to ensure that insurance documents filed on applicant's behalf are accepted, notify the FMCSA in writing (400 7th Street, SW, Rm. 8214, Washington, DC 20590) if the business or mailing address changes.

REPRESENTATIVE. If someone other than the applicant is preparing this form, provide the representative's name, title, position, or relationship to the applicant, address, and telephone and FAX numbers. Applicant's representative will be the contact person if there are questions concerning this application.

U.S. DOT NUMBER. Applicants subject to the Federal Motor Carrier Safety Regulations are required to register with U.S. Department of Transportation (U.S. DOT) before initiating service. Motor carriers that already have been issued a U.S. DOT registration number should provide it; applicants that have not registered with U.S. DOT should refer to the U.S. DOT information sources under the "Additional Assistance" part of these Instructions.

FORM OF BUSINESS. A business is either a corporation, sole proprietorship, or a partnership. If the business is a sole proprietorship, provide the name of the individual who is the owner. In this situation, the owner is the authority applicant. If the business is a partnership, provide the name of each partner.

SECTION II

TYPE OF AUTHORITY. Check the appropriate box(es) for the type(s) of authority you are requesting. Note: A separate filing fee is required for each type of authority requested. See "Fee Policy" in the application form. (A broker arranges for the transportation where the actual movement will be performed by licensed motor carriers. Brokers assume no responsibility for the property being transported.)

INSTRUCTIONS FOR FORM OP-1

APPLICATION FOR MOTOR PROPERTY CARRIER AND BROKER AUTHORITY

SECTION III

INSURANCE INFORMATION. Check the appropriate box(es) to describe the type of business you will be conducting. If you operate vehicles with a gross vehicle weight rating exceeding 10,000 pounds and haul only non-hazardous materials, you are required to maintain \$750,000 minimum liability coverage for the protection of the public. Hazardous materials referred to in the insurance regulations at 49 CFR 387.9 require \$1 million minimum liability coverage; those at 49 CFR 387.9 require \$5 million minimum liability coverage.

If you operate only vehicles with a gross vehicle weight rating under 10,000 pounds, you must maintain \$300,000 minimum liability coverage. If you operate only such vehicles but will be transporting any quantity of Division 1.1, 1.2, or 1.3 material; any quantity of Division 2.3, Hazard Zone A, or Division 6.1, Packing Group I, Hazard Zone A material; or highway route controlled quantities of a Class 7 material as defined in 49 CFR 173.403, you must maintain \$5 million minimum liability coverage.

Brokers of general freight and household goods must have on file with the FMCSA a surety bond or trust fund agreement in the amount of \$10,000.

Minimum levels of cargo insurance must be maintained by all motor property common carriers: \$5,000 for loss of or damage to property carried on any one motor vehicle and \$10,000 for loss of or damage to property occurring at any one time and place.

Appropriate insurance forms must be filed within 90 days after the date the notice of your application is published in the *FMCSA Register*: Form BMC-91 or BMC-91X for bodily injury and property damage, Form BMC-34 for cargo liability, Form BMC-84 for broker surety bond, and Form BMC-85 for broker trust fund agreement.

The FMCSA does not furnish copies of insurance forms. You must contact your insurance company to arrange for the filing of all required insurance forms.

SECTION IV

SAFETY CERTIFICATION. Applicants for motor carrier authority must complete the safety certification. You should check the "YES" response only if you can attest to the truth of the statements. The "Applicant's Oath" at the end of the application form applies to all certifications, and false certifications are subject to the penalties described in that oath.

If you operate only vehicles with a gross vehicle weight rating under 10,000 pounds and will not transport hazardous materials, you are exempt from the U.S. DOT safety fitness regulations; however, you must certify that you are familiar with and will observe general operational safety fitness guidelines and applicable State and local laws relating to the safe operation of commercial motor vehicles.

You must check only one of the boxes in this section.

SECTION V

AFFILIATIONS. All applicants must disclose pertinent information concerning affiliations, if any, with other former ICC, FHWA, or OMCS; now FMCSA licensed entities.

SECTIONS VI AND VII

HOUSEHOLD GOODS CERTIFICATIONS. If you are applying for household goods common carrier, household goods contract carrier, or household goods broker authority, you must complete the appropriate certification concerning these specialized services in Section VI.

If you are applying for household goods contract carrier authority, you also must provide the information concerning your operations in Section VII.

SECTION VIII

APPLICANT'S OATH. Applications may be prepared by the applicant or an authorized representative. In either case, the oath must be signed by the applicant. In the case of corporations, an authorized employee in the ownership structure may sign.

An individual with power of attorney to act on behalf of the applicant may sign, provided that proof of the power of attorney is submitted with the application.

INSTRUCTIONS FOR FORM OP-1
APPLICATION FOR MOTOR PROPERTY CARRIER AND BROKER AUTHORITY

**LEGAL PROCESS
AGENTS**

All motor carrier applicants must designate a process agent in each State where operations are authorized. All broker applicants must designate a process agent in each State in which offices are located and in which contracts will be written. Process agents who will accept legal filings on applicant's behalf are designated on FMCSA Form BOC-3. Form BOC-3 must be filed within 90 days after the date notice of the application is published in the *FMCSA Register*.

**STATE
NOTIFICATION**

Before beginning new or expanded interstate operations, all applicants must contact the appropriate regulatory agencies in every State in and through which the carrier will operate to obtain information regarding various State rules applicable to interstate authorities. It is the applicant's responsibility to comply with registration, fuel tax, and other State regulations and procedures. Begin this process by contacting the transportation regulatory agency for the State in which your business is located.

**MAILING
INSTRUCTIONS**

To file for authority, you must submit an original of this application with the appropriate filing fee.

NOTE: RETAIN A COPY OF THE COMPLETED APPLICATION FORM AND ANY ATTACHMENTS FOR YOUR OWN RECORDS.

MAILING ADDRESSES FOR APPLICATIONS WITH ALL DOCUMENTS AND FEES ATTACHED:

FOR CHECKS AND MONEY ORDERS

Federal Motor Carrier Safety Administration
P.O. Box 409934
Atlanta, GA 30384-9934

FOR EXPRESS MAIL ONLY

Bank of America
Attn: DOT-Motor Carriers
Lockbox #409934
6000 Feldwood Road
College Park, GA 30349

FOR CREDIT CARD USERS ONLY

Federal Motor Carrier Safety Administration
400 7th Street, SW, Rm. 8214
Washington, DC 20590

STATUS: After your application is processed by the licensing and insurance (L&I) staff, you can check its status on the Internet. Application, insurance, and process agent information appears on the L&I Web site as soon as it is manually entered into the database or filed electronically. The Web site address is <http://li-public.fmcsa.dot.gov>.

INSTRUCTIONS FOR FORM OP-1
APPLICATION FOR MOTOR PROPERTY CARRIER AND BROKER AUTHORITY

**ADDITIONAL
ASSISTANCE**

INFORMATION SOURCES

Additional information on obtaining operating authority or monitoring the status of your applications is available through the FMCSA's Automated Response Capability (ARC) telephone system. After dialing (202) 358-7000, press 1, then request the appropriate menu number indicated below. You may use the ARC 24 hours a day, 7 days a week to obtain information in the following areas:

Information Requested

MENU NUMBER

- | | |
|---|---|
| • Status of your application
(NOTE: Tracking the status of your application can be simplified and expedited if you refer to the assigned MC number when making inquiries. You will be informed of your MC number by letter sent on the date notice of your application appears in the <i>FMCSA Register</i> .) | 1 |
| • Assistance in filing your application | 3 |
| • Status of insurance and process agent filings | 2 |

If you require information that is not available in the automated response system, the ARC will guide you to an appropriate staff member who will be able to assist you in other areas.

U.S. DEPARTMENT OF TRANSPORTATION INFORMATION SOURCES

U.S. DOT Registration and Safety Ratings

- To obtain information on registering with U.S. DOT (filing Form MCS-150), go to <http://safer.fmcsa.dot.gov> or write to the address below.
- To request a safety fitness review, go to <http://safer.fmcsa.dot.gov> or write to the address below.

Director, Office of Information Systems
Federal Motor Carrier Safety Administration
400 7th St., SW
Washington, DC 20590

or call: (800) 832-5660

Note: The above number may also be contacted for information concerning a carrier's assigned safety rating.

U.S. DOT Hazardous Materials Regulations

- To obtain information on whether the commodities you intend to transport are considered to be hazardous materials:

Refer to the provisions governing hazardous materials in the Federal Motor Carrier Safety Regulations at Parts 170 through 189 of Title 49 of the Code of Federal Regulations (CFR), particularly the Hazardous Materials Table at 49 CFR Part 172, or contact U.S. DOT at (202) 366-6121.

- To obtain information about DOT hazardous materials transportation registration requirements:
Contact U.S. DOT at (202) 366-4109.

**FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION
FORM OP-1**

APPLICATION FOR MOTOR PROPERTY CARRIER AND BROKER AUTHORITY

Approved by OMB 2126-0016

Revised May 2004

This application is for all individuals and businesses requesting authority to operate as motor property common or contract carriers or property brokers.

FOR FMCSA USE ONLY

Docket No. MC-_____

Filed _____

Fee No. _____

CC Approval No. _____

SECTION I

**Applicant
Information**

Do you now have authority from or an application being processed by the former ICC, FHWA, OMCS or FMCSA?

() NO () YES If yes, identify the lead docket number(s)

LEGAL BUSINESS NAME

DOING BUSINESS AS NAME

BUSINESS ADDRESS

Street Name and Number

City State Zip Code Telephone Number

MAILING ADDRESS (If different from above)

City State Zip Code

REPRESENTATIVE (Person who can respond to inquiries)

Name, Title, position, or relationship to applicant

Street Name and Number City State Zip Code

Telephone Number (_____) FAX Number (_____) _____

U.S. DOT Number (If available; if not, see Instructions.) _____

FORM OF BUSINESS (Check only one.)

() Corporation State of Incorporation _____

() Sole Proprietorship Name of Individual _____

() Partnership Identify Partners

SECTION II**Type of Authority**

You must submit a filing fee of \$300.00 for each type of authority requested (for each box checked).

- ☐ MOTOR COMMON CARRIER OF PROPERTY (except HOUSEHOLD GOODS)
- ☐ MOTOR CONTRACT CARRIER OF PROPERTY (except HOUSEHOLD GOODS)
- ☐ MOTOR COMMON CARRIER OF HOUSEHOLD GOODS
- ☐ MOTOR CONTRACT CARRIER OF HOUSEHOLD GOODS
- ☐ BROKER OF PROPERTY (except HOUSEHOLD GOODS)
- ☐ BROKER OF HOUSEHOLD GOODS
- ☐ UNITED STATES BASED ENTERPRISE OWNED OR CONTROLLED BY PERSONS OF MEXICO PROVIDING TRUCK SERVICES FOR THE TRANSPORTATION OF INTERNATIONAL CARGO (except HOUSEHOLD GOODS)
- ☐ UNITED STATES BASED ENTERPRISE OWNED OR CONTROLLED BY PERSONS OF MEXICO PROVIDING TRUCK SERVICES FOR THE TRANSPORTATION OF INTERNATIONAL HOUSEHOLD GOODS

SECTION III**Insurance
Information**

This section must be completed by ALL motor property carrier applicants. The dollar amounts in parentheses represent the minimum amount of bodily injury and property damage (liability) insurance coverage you must maintain and have on file with the FMCSA.

NOTE: Refer to the instructions for information on cargo insurance filing requirements for motor common carriers and surety bond/trust fund agreement filings for property brokers.

- ☐ Will operate vehicles having Gross Vehicle Weight Ratings (GVWR) of 10,000 pounds or more to transport:
 - ☐ Non-hazardous commodities (\$750,000).
 - ☐ Hazardous materials referenced in the FMCSA's insurance regulations at 49 CFR 387.9 (\$1,000,000).
 - ☐ Hazardous materials referenced in the FMCSA's insurance regulations at 49 CFR 387.9 (\$5,000,000).
- ☐ Will operate only vehicles having Gross Vehicle Weight Ratings (GVWR) under 10,000 pounds to transport:
 - ☐ Any quantity of Division 1.1, 1.2, or 1.3 material; any quantity of Division 2.3, Hazard Zone A, or Division 6.1, Packing Group I, Hazard Zone A material; or highway route controlled quantities of a Class 7 material as defined in 49 CFR 173.403
 - ☐ Commodities other than those listed above (\$300,000).

SECTION IV

**Safety
Certification
(Motor Carrier
Applicants
Only)**

APPLICANTS SUBJECT TO FEDERAL MOTOR CARRIER SAFETY REGULATIONS -

If you will operate vehicles of more than 10,000 pounds GVWR and are, thus, subject to pertinent portions of the U.S. DOT's Federal Motor Carrier Safety Regulations at 49 CFR, Chapter 3, Subchapter B (Parts 350-399), you must certify as follows:

Applicant has access to and is familiar with all applicable U.S. DOT regulations relating to the safe operation of commercial vehicles and the safe transportation of hazardous materials and it will comply with these regulations. In so certifying, applicant is verifying that, at a minimum, it:

- (1) Has in place a system and an individual responsible for ensuring overall compliance with Federal Motor Carrier Safety Regulations;
- (2) Can produce a copy of the Federal Motor Carrier Safety Regulations and the Hazardous Materials Transportation Regulations;
- (3) Has in place a driver safety training/orientation program;
- (4) Has prepared and maintains an accident register (49 CFR 390.15);
- (5) Is familiar with DOT regulations governing driver qualifications and has in place a system for overseeing driver qualification requirements (49 CFR Part 391);
- (6) Has in place policies and procedures consistent with DOT regulations governing driving and operational safety of motor vehicles, including drivers' hours of service and vehicle inspection, repair, and maintenance (49 CFR Parts 392, 395 and 396);
- (7) Is familiar with and will have in place on the appropriate effective date, a system for complying with U.S. DOT regulations governing alcohol and controlled substances testing requirements (49 CFR 382 and 49 CFR Part 40).

() YES

EXEMPT APPLICANTS - If you will operate only small vehicles (GVWR under 10,000 pounds) and will not transport hazardous materials, you are exempt from Federal Motor Carrier Safety Regulations, and must certify as follows:

Applicant is familiar with and will observe general operational safety guidelines, as well as any applicable State and local laws and requirements relating to the safe operation of commercial motor vehicles and the safe transportation of hazardous materials.

() YES

SECTION V

Affiliations

AFFILIATION WITH OTHER FORMER ICC, FHWA OR OMCS, NOW FMCSA-LICENSED ENTITIES. Disclose any relationship you have or have had with any other FMCSA-regulated entity within the past 3 years. For example, this could be through a percentage of stock ownership, a loan, or a management position. If this requirement applies to you, provide the name of the company, MC-number, DOT number, and that company's latest U.S. DOT safety rating. (If you require more space, attach the information to this application form.)

SECTION VI**Household Goods
Certifications**

HOUSEHOLD GOODS MOTOR COMMON CARRIER APPLICANTS including United States-based enterprises owned or controlled by persons of Mexico providing truck services for the transportation of international household goods shipments must certify as follows:

Applicant is fit, willing, and able to provide the specialized services necessary to transport household goods. This assessment of fitness includes applicant=s general familiarity with former ICC, FHWA, or OMCS now FMCSA regulations for household goods movements and also requires an assurance that applicant has or is willing to acquire the protective equipment and trained operators necessary to perform household goods movements and that applicant will offer arbitration as a means of settling loss and damage disputes on collect-on-delivery shipments. The proposed operations will serve a useful public purpose responsive to a public demand or need.

() YES

HOUSEHOLD GOODS MOTOR CONTRACT CARRIER APPLICANTS must certify as follows:

Applicant is fit, willing, and able to provide the specialized services including United States-based enterprises owned or controlled by persons of Mexico providing truck services for the transportation of international household goods shipments necessary to transport household goods. This assessment of fitness includes applicant=s general familiarity with former ICC, FHWA, or OMCS, now FMCSA regulations for household goods movements and also requires an assurance that applicant has or is willing to acquire the protective equipment and trained operators necessary to perform household goods movements and that applicant will offer arbitration as a means of settling loss and damage disputes on collect-on-delivery shipments. The proposed service will be consistent with the public interest and the transportation policy of 49 U.S.C. 10101.

() YES

HOUSEHOLD GOODS BROKER APPLICANTS must certify as follows:

Applicant is fit, willing, and able to provide household goods brokerage operations and to comply with all pertinent statutory and regulatory requirements. The involved services will be consistent with the public interest and the transportation policy of 49 U.S.C. 10101.

() YES

NOTE: Applicant may attach a supporting statement to this application to provide additional information about any of the above certifications. This evidence is optional.

SECTION VII

**Applicants for
Contract Carriage of
Household Goods**

SCOPE OF OPERATING AUTHORITY. Complete one or both box(es) below, as applicable.

() Contracting shippers have one or more of the distinct needs delineated in *Interstate Van Lines, Inc., Extension - Household Goods*, 5 I.C.C.2d 168 (1988).

Describe briefly the distinct need(s):

() Contracts provide for assignment of one or more vehicles for the exclusive use of each shipper in the manner specified in *Interstate Van Lines, Inc., Extension - Household Goods*, 5 I.C.C.2d 168 (1988).

SECTION VIII

**Applicant's
Oath**

This oath applies to all supplemental filings to this application. The signature must be that of applicant, not legal representative.

I, _____, verify under
Name and title

penalty of perjury, under the laws of the United States of America, that all information supplied on this form or relating to this application is true and correct. Further, I certify that I am qualified and authorized to file this application. I know that willful misstatements or omissions of material facts constitute Federal criminal violations punishable under 18 U.S.C. 1001 by imprisonment up to 5 years and fines up to \$10,000 for each offense. Additionally, these misstatements are punishable as perjury under 18 U.S.C. 1621, which provides for fines up to \$2,000 or imprisonment up to 5 years for each offense.

I further certify under penalty of perjury, under the laws of the United States, that I have not been convicted, after September 1, 1989, of any Federal or State offense involving the distribution or possession of a controlled substance, or that if I have been so convicted, I am not ineligible to receive Federal benefits, either by court order or operation of law, pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988 (21 U.S.C. 862)

Finally, I certify that applicant is not domiciled in Mexico or owned or controlled by persons of that country. (Note: This portion of Applicant's oath does not pertain to applicants that are U.S.-based enterprises owned or controlled by persons of Mexico seeking to provide truck services for the transportation of international cargo.).

Signature_____ **Date**_____

**Filing Fee
Information**

All applicants must submit a filing fee for each type of authority requested. The enclosed fee schedule will show the appropriate filing fee. The total amount due is equal to the fee times the number of boxes checked in *Section II*. Fees for multiple authorities may be combined in a single payment.

Total number of boxes checked in *Section II*: _____ x filing fee \$_____ = \$_____

INDICATE AMOUNT \$_____ AND METHOD OF PAYMENT

() CHECK or () MONEY ORDER, payable to: FMCSA

() VISA () MASTERCARD

Credit Card Number _____ Expiration Date _____

Signature _____ Date _____

Fee Policy

- Filing fees must be payable to the **Federal Motor Carrier Safety Administration (FMCSA)**, by check drawn upon funds deposited in a bank in the United States or money order payable in U.S. currency or by approved credit card.
- Separate fees are required for each type of authority requested. If applicant requests multiple types of permanent authority on one application form (for example, common and contract carrier authority) or if applicant submits more than one form in the OP-1 Series in a single filing, multiple fees are required. The applicant may submit a single payment for the sum of the applicable fees.
- Filing fees must be sent, along with the original application, to:

For Check or Money Order:
FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION
P. O. Box 409934, Atlanta, GA, 30384-9934

For express mail only:
BANK OF AMERICA, ATTN: DOT-MOTOR CARRIERS
LOCKBOX #409934, 6000 Feldwood Road, College Park, GA 30349

For credit card only:
FMCSA, Licensing Team 400 Seventh Street, S.W.,
Rm.8214, Washington, D.C., 20590.
- After an application is received, **the filing fee is not refundable.**
- The FMCSA reserves the right to discontinue processing any application for which a check is returned because of insufficient funds. The application will not be processed until the fee is paid in full.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The OMB control number for this collection is 2126-0016. It is estimated that an average of 2 burden hours per response is required to complete this collection of information. This estimate includes time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Comments concerning the accuracy of this burden estimate or suggestions for reducing this burden should be directed to the Federal Motor Carrier Safety Administration, Licensing Team, 400 7th St., SW, Washington, DC 20590.